| ľ   |  |   | Application or Docket Number |                                   |                       |                  |         |            |                        |            |            |                        |  |
|---|--|---|------------------------------|-----------------------------------|-----------------------|------------------|---------|------------|------------------------|------------|------------|------------------------|--|
| PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2003                  |  |   |                              |                                   |                       |                  |         |            | 10 773,828             |            |            |                        |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                              |                                   |                       |                  |         | SMALL E    | NTITY                  | OR         |            | THAN<br>ENTITY         |  |
| T   | OTAL CLAIMS  | 20  |                              |                                   |                       | •                |         | RATE       | FEE                    | 7          | RATE       | FEE                    |  |
| F   | OR ·   |   | NUMBER FILED                 |                                   | NUMBER EXTRA          |                  |         | BÀSIC FE   | E 385.00               | OR         | BASIC FEE  | 770.00                 |  |
| TO  | OTAL CHARGE  | ABLE CLAIMS                               | 27) minus 20=                |                                   | · 8                   |                  |         | X\$ 9=     |                        | ОЯ         | X\$18=     |                        |  |
| INI   | DEPENDENT C  | LAIMS                                     | 3 minus 3 =                  |                                   | 120                   |                  |         | X43=       | ·                      | OR         | X86=       | ·                      |  |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |                              |                                   |                       |                  |         | +145=      |                        | OR         | +290=      |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2              |  |   |                              |                                   |                       |                  |         | TOTAL      | 385                    | OR         | TOTAL      |                        |  |
| CLAIMS AS AMENDED - PART II   |  |   |                              |                                   |                       |                  |         |            | <del></del>            | _          | OTHER      | THAN                   |  |
|   | (Column 1)   |   |                              |                                   | (Column 2) (Column 3) |                  |         | SMALL      | ENTITY                 | OR         | SMALL      |                        |  |
| AMENDMENT A   |  | REMAINING<br>AFTER<br>AMENDMENT           |                              | NUME<br>PREVIO<br>PAID F          | BER                   | PRESENT<br>EXTRA |         | RATE       | ADDI-<br>TIONAL<br>FEE |            | RATE       | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | - 20                                      | Minus                        | - 2                               | D_                    | -                |         | ·X\$ 9=    |                        | OR         | X\$18=     |                        |  |
| <b>AME</b>  | Independent  | . 3                                       | Minus                        | (é                                |                       | <b>P</b>         |         | X43=       |                        | OR         | X86=       |                        |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                              |                                   |                       |                  |         | +145=      |                        | OR         | +290=      |                        |  |
| 1,10,16   |  |   |                              |                                   |                       |                  |         | TOTAL      |                        |            | TOTAL      |                        |  |
|   | (Column 1) (Column 2) (Column 3)   |   |                              |                                   |                       |                  |         | IDDIT. FEE |                        |            | ADDIT. FEE |                        |  |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                              | HIGHE<br>NUME<br>PREVIO<br>PAID F | ST<br>SER<br>USLY     | PRESENT<br>EXTRA |         | RATE       | ADDI-<br>TIONAL<br>FEE |            | RATE       | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | •   | Minus                        | **                                |                       | Ξ .              |         | X\$ 9=     |                        | OR         | X\$18=     |                        |  |
|   | Ind pendent  | •   | Minus                        | ***                               | •                     | <u> </u>         |         | X43=       |                        | OR         | X86=       |                        |  |
|   | FIRST PRESENTATION OF MULTIPL  |   |                              | LE DEPENDENT CL                   |                       | CLAIM            |         | +145=      |                        | OR         | +290=      |                        |  |
|   |  |   |                              |                                   |                       |                  |         | TOTAL      | . , ,                  |            | TOTAL      | •                      |  |
| (Column 1) (Column 2) (Column 3)  |  |   |                              |                                   |                       |                  |         | DDIT. FEE  | . •                    | JO., /     | ADDIT, FEE | • .                    |  |
|   | (Column 1) CLAIMS  |   |                              | HIGHE                             | (Column 3)            |                  |         | ADDI-      |                        | 1          | ADDI-      |                        |  |
| AMENDMENT C   |  | REMAINING<br>AFTER<br>AMENDMENT           | ·                            | PREVIO                            | USLY                  | PRESENT<br>EXTRA |         | RATE       | TIONAL<br>FEE          |            | RATE       | TIONAL<br>FEE          |  |
|   | Total  | *   | Minus                        | **                                |                       | =                | ŀ       | X\$ 9=     |                        | OR         | X\$18=     | ,                      |  |
| AME   | Independent  | •   | Minus                        | ***                               | <b>A. A. C.</b> C.    | -                |         | X43=       |                        | OR         | X86=       |                        |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                              |                                   |                       |                  |         | +145=      |                        | OR-        | +290=      |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |   |                              |                                   |                       |                  |         |            |                        | OB L       | TOTAL      |                        |  |
| ***   | "If the "High st Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE ADDIT. FEE ADDIT. FEE  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                              |                                   |                       |                  |         |            |                        |            |            |                        |  |
|   | ine rignest Num  | wer ineviously Pax                        | TOT (1012) OF                | unsbeugel                         | ny is ine             | myrest number    | ······· | outer supp | лоргия 000             | . 117 CUIL |            |                        |  |